

**Petition for Extension of Time  
under 37 CFR 1.136(a)**

**Docket Number**

GRIP108US

**Address To  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450**

## **Application Information**

|                      |                   |
|----------------------|-------------------|
| First Named Inventor | Stephen MORRIS    |
| Application No.      | 10/567,071        |
| Filing Date          | February 03, 2006 |
| Examiner             | Ajith Jacob       |
| Art Unit             | 2161              |

**Title of Invention**

## METHOD OF PROCESSING DATA FOR A SYSTEM MODEL

**COMMISSIONER FOR PATENTS:**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

**Applicant(s) hereby request(s) an extension of time of (check desired time period):**

- |  |  |
|--|--|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) |  |

from: **06/19/2010** until **09/19/2010**  
*Date* *Date*

### **Fee Calculation**

|   |                                   |              |
|---|-----------------------------------|--------------|
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | <b>Fee for Extension of Time:</b> | \$555        |
|   | <b>TOTAL</b>                      | <b>\$555</b> |

**Method of Payment**

- Deposit Account     Credit Card     Check     Money Order     Other: On-Line Credit Card Payment

Deposit Account Number **50-0832**

**For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)**

- Charge the fee(s) set forth above

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

Charge fee(s) indicated above, except for the filing fee

Credit any overpayments

If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to the Deposit Account above.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on form PTO-2038.

Amount Grand Total \$555

# Petition for Extension of Time under 37 CFR 1.136(a)

Docket Number

GRIP108US

## Correspondence Address

Customer Number **24041**

-OR-

Name

Address

City

Country

Phone Number

E-mail Address

## Certificate of Mailing by Express Mail

I hereby certify that this Petition for Extension of Time, accompanying documents, and fee are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on the date indicated below:

(Date of Mailing)

(Typed or Printed Name of Person Mailing Correspondence)

(Signature of Person Mailing Correspondence)

("Express Mail" Mailing Label Number)

## Certificate of Mailing by First Class Mail

I hereby certify that this Petition for Extension of Time, accompanying documents, and fee are being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on the date indicated below:

(Date of Mailing)

(Name of Person Mailing Correspondence)

(Signature of Person Mailing Correspondence)

## Certificate of Transmission

I hereby certify that this Petition for Extension of Time, accompanying documents, and fee authorization are being facsimile transmitted to the United States Patent and Trademark Office on the date indicated below:

(Date of Transmission)

(Name of Person Transmitting Correspondence)

(Signature of Person Transmitting Correspondence)

## Signature Instructions

Select the name of the person who will electronically sign the Petition for Extension of Time from the drop-down box below.

If a practitioner is not present in the drop-down list, you must close this form and select "Add Practitioner..." in the Form Manager's Utility menu.

**Verify that the signatory information is correct and press the 'eSign' button to electronically sign the submission.  
If you prefer to sign the form manually, simply do not click the 'eSign' button; just print and manually sign.**

Signatory Drop-Down Box

Maliszewski, Chester Paul

|                    |                            |  |                     |            |
|--------------------|----------------------------|--|---------------------|------------|
| Name               | Chester Paul Maliszewski   |  | Registration Number | 51,990     |
| Signatory Capacity | Agent for Applicant(s)     |  | E-mail Address      |            |
| eSign              | /Chester Paul Maliszewski/ |  | Date Signed         | 09/16/2010 |